

Deposit Account Maintenance

Deposit Account Window Help



Deposit Account

Number: 232415

Balance Amount: 135.86

Holder

Name: WILSON, SONSINI, GOODRICH & ROSATI PC



Address

Attention: JANE SILARAJS 1117-L

Street: 650 PAGE MILL ROAD

Province:

City: PALO ALTO

State:

CA

Postal Code: 94304-1050

Country:

US

Telephone:

650-493-9300 X 6208

Fax: 650-845-5000

Details

Category Code: NONGOVNMNT

Type: REGULAR

Notification Amt:

0.00

Status

Active

Closed

Access Code:

CNGUYEN

11/28/2005

NOTICE OF FEE DUE

DATE:

11-2805

TO:

IPW

FROM:

Office of Initial Patent Examination

SUBJECT:

Fee Due

APPLICATION NUMBER

10814749

A fee is due for the attached document submitted to the U.S. Patent and Trademark Office for the following reason. Please check the application for the appropriate authorizations to charge a deposit account if an authorizations is present, please charge the Appropriate Fee. If and authorization is not present, notify the applicant of the fee deficiency.

- Insufficient fee by check
- Insufficient funds in deposit amount
- Insufficient by Credit Card
- Declined credit card
- Non-authorization for charge to deposit account
- No fee submitted per requirement

The correct fee code: _____

Amount \$ _____

The suspended fee code: 1999

Amount \$ _____

The suspended 1622

Amount \$ _____

The suspended 2622

Amount \$ _____

Fee Due

Amount \$ _____

Terminal Operator _____

ON